## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE

Commissioner for Patents
P.O. Box 1450

Alexandria, Virginia, 22313-1450

or Fax (571)-273-2885



•			or Fax (5)	1)-2/3-2003					
NSTRUCTIONS: This for ppropriate. All further corndicated unless corrected to naintenance fee notification	rrespondence including below or directed other	for transmitting the ISSU on the Patent, advance of the Patent, advance of the transfer in Block 1, by (1)	JE FEE and PUBLICAT rders and notification of a specifying a new corre	ION FEE (if requi maintenance fees w spondence address;	red). Blocks 1 through vill be mailed to the cur and/or (b) indicating a	5 should be completed where rent correspondence address as separate "FEE ADDRESS" for			
CURRENT CORRESPONDENC		ock 1 for any change of address)	Noi Fee pap hav	e: A certificate of (s) Transmittal. Thi ers. Each additiona e its own certificate	for domestic mailings of the d for any other accompanying ment or formal drawing, must				
24998 75	90 01/24	/2007							
DICKSTEIN SH. 1825 EYE STREE Washington, DC 20	T NW		I he Sta add tran	reby certify that the Postal Service we ressed to the Mail smitted to the USP	tificate of Mailing or Trais Fee(s) Transmittal is be ith sufficient postage for Stop ISSUE FEE adds TO (571) 273-2885, on t	ransmission being deposited with the United r first class mail in an envelope ress above, or being facsimile the date indicated below.			
						(Depositor's name)			
	•		_		<u></u>	(Signature)			
			<u>L</u>		·	(Date)			
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO	O. CONFIRMATION NO.			
10/747,951	12/31/2003		Yoshiyuki Shoji	6942					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	FEE TOTAL FEE(S) I	DUE DATE DUE			
nonprovisional	NO	\$1400	\$300	\$0	\$1700	04/24/2007			
<u> </u>			1						
EXAMINI		ART UNIT	CLASS-SUBCLASS	1400.00 OP					
	LEWIS, PATRICK T 1623  Change of correspondence address or indication of "Fee Address" (37			01000 02 FC:1504 300.00 OP 15.00 OP 15.00 OP					
FR 1.363).			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys Dickstein Shapiro Li						
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternatively,  (2) the name of a single firm (having as a member a						
"Fee Address" indicate PTO/SB/47; Rev 03-02 Number is required.			registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
. ASSIGNEE NAME AND	RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or ty	pe)					
PLEASE NOTE: Unless recordation as set forth in	s an assignee is ident n 37 CFR 3.11. Com	tified below, no assignee pletion of this form is NC	data will appear on the p or a substitute for filing an	atent. If an assign	ee is identified below, the	ne document has been filed for			
(A) NAME OF ASSIGN	•		(B) RESIDENCE: (CITY and STATE OR COUNTRY)						
Hitachi, Lt	td.		JAPAN						
lease check the appropriate	e assignee category or	r categories (will not be p	rinted on the patent):	Individual 😡 Co	orporation or other private	e group entity Government			
a. The following fee(s) are	submitted:	4	b. Payment of Fee(s): (Ple	ase first reapply an	y previously paid issue	fee shown above)			
Issue Fee	•		A check is enclosed.						
Publication Fee (No s		permitted)	☑ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any						
Advance Order - # o	t Copies	<u> </u>	overpayment, to Depo	sit Account Number	ge the required fee(s), and the control of the required fee(s), and the control of the control o	y deficiency, or credit any se an extra copy of this form).			
. Change in Entity Status									
a. Applicant claims S			b. Applicant is no lor						
iterest as shown by the rec	ords of the United Sta	ates Patent and Trademar	k Office.	me appricant; a regi	stered attorney or agent;	or the assignee or other party in			
Authorized Signature	M			DateApri]	24, 2006				
				Registration No. 33,082					
Typed or printed name _	Mark J. T	hronson		Registration N	6. <u>33,082</u>	<del></del>			

submitting the complete application form to the USP10. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTO/SB/17 (02-07)
Approved for use through 02/28/2007. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Effective Contraction	Complete if Known												
Effective Fees pursuant to the Consolidate			10/747,951-Conf. #6942										
FEE TRA	Filing Date De		December 31, 2004										
	First Named Inventor Y		Yoshiyuki Shoji										
For	Examiner Name		P. T. Lewis										
Applicant claims smal	Art Unit	<u>_</u>	1623										
TOTAL AMOUNT OF PAY	MENT	(\$) 1,715.00	0	Attorney Docket	19450.0077/F	P077-B							
METHOD OF PAYMEN	IT (check all t	hat apply)											
Check X Credit Card Money Order None Other (please identify):  Deposit Account Deposit Account Number: 04-1073 Deposit Account Name: Dickstein Shapiro LLP													
Deposit Account Depo	osit Account Numb	per: <u>04-1073</u> p	eposit Acc	ount Name:	Dic	kstein Shapi	ro LLP						
For the above-iden	tified deposit	account, the Di	rector is	hereby authorize	ed to: (check	k all that apply)	)						
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee													
Charge any additional fee(s) or underpayments of x Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17													
FEE CALCULATION							,						
1. BASIC FILING, SEARCI	•												
	FILIN	G FEES Small Entity	SE	ARCH FEES Small Entity	EXAMIN	ATION FEES Small Entity	5						
Application Type	Fee (\$)	Fee (\$)	Fee (\$		Fee (\$)	Fee (\$)	Fees !	Paid (\$)					
Utility	300	150	500	250	200	100							
Design	200	100	100	50	130	65							
Plant	200	100	300	150	160	80							
Reissue	300	150	500	250	600	300							
Provisional	200	100	0	0	0	. 0							
2. EXCESS CLAIM FEES								Small Entity					
Fee Description Each claim over 20 (include	ling Reissues	)					Fee (\$) 50	Fee (\$) 25					
Each independent claim ov	er 3 (includir	ng Reissues)					200	100					
Multiple dependent claims							360	180					
Total Claims Extra	Claims F	ee (\$)	Fee F	Paid (\$)	Multiple Depend		ent Claims						
- 20 = HP = highest number of total cla		<u>Fee</u>	<del>) (\$)</del>	Fee Paid (	<u>5)</u>								
Indep. Claims Extra	Claims F	ee (\$)	Fee F	Paid (\$)				_					
- 3 =	x	-											
HP = highest number of indeper		I for, if greater thar	1 3.					_					
3. APPLICATION SIZE FE If the specification and dr listings under 37 CFR sheets or fraction there	awings exceed 1.52(e)), the	application size	e fee du	ie is \$250 (\$125 f				0					
	xtra Sheets			dditional 50 or frac			<u>Fee</u>	Paid (\$)					
4. OTHER FEE(S)				(lound up to a wild	ne namber, x	`	Fees	Paid (\$)					
Non-English Specificat	ion, \$130 fe	e (no small ent	ity disc	ount)			****						
Other (e.g., late filing surcharge): 1501 Utility issue fee 1,400.00													
		300.00 15.00											
		JOT I TIME UCC	U	patent w/o color				0.00					
SUBMITTED BY				Registration No.	22.000	Talesta	(200) 10	0.4740					
Signature	ant l	X TOV		(Attorney/Agent)	33,082	Telephone	(202) 42						
Name (Print/Type) Mark J.	Thronson	Kachaci	les	Ceverth	5/	Date	April 24	, 2007					